

air that has such a mysterious, indescribable effect upon you. The "bigness" of it all, its endless expansiveness, is not overwhelming but most exhilarating!

We would welcome nurses from the East. The field is broad and open, possibilities innumerable, experiences varied and interesting to a degree. We do not only want nurses for private duty, but especially we ask for those who will interest themselves in institutional work, in district and school work, and above all those who can give time and thought in the interest and advancement of their profession.

N. L. DORSEY,
Omaha V. N. A.,
Omaha, Nebraska.

"AFTER DEATH"

DEAR EDITOR: Ever since I read the article in the JOURNAL, several months ago, called "After Death," I have felt tempted to add a few suggestions.

An undertaker told me in bathing the patient after death not to turn him, or her, on the side, but leave flat on the back, placing two or three pillows under the head and well down under the shoulders in order to keep the blood from the head. Also, before arranging the pillows, draw the patient down to the foot of the bed with the feet against the foot-board and fold a towel in long narrow folds and pin around the ankles. This makes it easier to put the shoes on afterward. If the bed should be of brass or iron, with no foot-board, place a board or something firm across the foot of the bed.

I had always removed all but one pillow.

M. D. B.

OBSERVATION AND EXPERIENCE WHILE IN NEW MEXICO

DEAR EDITOR: I arrived in New Mexico early in the fall of 1905 after a very warm and tiresome journey. There was a wreck just in front of us, and our train sat on the roadside for twelve hours in Kansas. As there was not even an excuse for a restaurant within several miles, we were a hungry as well as a tired crowd when the train finally moved on.

My first impression of Las Vegas was a pleasing one, also of the hospital where my destination was. Though it had few modern conveniences, everything was in good order, and looked very professional. But the work was doubly hard owing to the poor arrangement of the building, which at one time had been a saloon. I soon

found that good trained nurses were very scarce, the majority of the nurses in the town having taken it up after a few months in a hospital or sanatorium as "help," and these wore white dresses and caps, and appeared to "the manner born"—to the indignation of the professional nurses.

The physicians I knew best did not seem to approve of these nurses, but would have to employ them when none better could be secured. The Superintendent and myself have both spent more time than we could well spare trying to get a good nurse for some trying case, to give up finally in despair, and content ourselves with any one who could sit in the room with the patient and call a nurse if he appeared worse.

The West seems to be a good field for private nursing, judging by my experience. Though we had quite a little surgical work in the hospital, the patients were mostly tubercular, and there was everything interesting in that line, and the experience was most valuable. As we had not a resident physician and could not always reach the attending physician in an emergency, of course we had to depend upon ourselves, largely. The treatment given by the different physicians varied very little. All prescribed rest, fresh air in abundance, nourishing diet and very moderate exercise. For hæmorrhages from the lungs—which are very common there—we put ice-bags to chest, and kept them from 12 to 24 hours, according to the severity of the flow. Gave morphine grs. $\frac{1}{8}$ to $\frac{1}{4}$, and sometimes atropine $\frac{1}{16}$. Of course the patient was kept well propped up in bed, and one physician preferred amyl nitrite (for checking the hæmorrhage) to morphine. All gave liquid diet every four hours.

The climate in Vegas did not impress me very favorably, and I failed to see the great advantage it has over a high altitude in the East for tuberculosis, especially as we had a great deal of rainy weather, and the climate seemed as variable as in the East. Being about 6500 feet above sea level, the moisture quickly dried out of the atmosphere. The consumptives who go there in the incipient stage do well, and, if they stay in the West in a high altitude, live the average number of days. But after the disease has gotten a firm hold upon the system, and after the first rally which change of surroundings and new interests cause, the patient either fails rapidly and finds a grave in a strange land or, after months of hopeless fighting, goes home to take his chances there.

It is very hard to induce these people to use the proper means for their ultimate recovery. They seem to think the doctors and nurses

are urging them to these measures because they have a grudge against them, and consequently carry out their orders very reluctantly.

The best results are obtained where people camp out on the ranches, bringing family or friends with them, and so have contented minds. There are several institutions in Vegas for the care of the "white plague," among them St. Anthony's Sanitarium, a Roman Catholic institution, where the nursing is done by the Sisters. It is a large and well-equipped building, and is generally full of the more moderate cases.

The Las Vegas Hospital is an eleemosynary institution, having only four private rooms, and here are usually received the most hopeless cases. The managers of the hospital are making strenuous efforts for a more commodious building with all the necessary equipments. This little hospital boasted the best operating-room in the town; the Sisters having taken theirs for a private room.

JESSIE S. FRANKLIN,
Graduate of Children's and Columbia Hospitals,
Washington, D. C.

RANK FOR THE ARMY NURSE

DEAR EDITOR: Referring to your comment in the foot-note following my communication in your last issue, I would respectfully invite attention to the text of the paragraph in which the phrase "convulsion of nature" occurs. I think you will admit that no reference, either direct or implied, can be found there to those through whose efforts the Army Nurse Corps was established. The subject under discussion was the relative status—position, place, or whatever you may see fit to name it—of officers and enlisted men in the army (army nurses belong in neither class). Hoping to emphasize my meaning, I borrowed geological phrase and fact. That my metaphor fell so far short of accomplishing what I intended is to be regretted. But I frankly confess that I fail to see by what stretch of interpretation anything in the paragraph above referred to could be construed as applying to the founders of the Army Nurse Corps. Surely there is not any one person from whom adverse criticism of that "group of women" could come with so bad grace as from myself. I deplore inexpressibly that my message was so awkwardly "put" that such a misapprehension was possible.

DITA H. KINNEY,
Superintendent, Army Nurse Corps.